

CLAIMS ONLY				Application Number 10/723/48		Filing Date	
				Applicant(s)			
* May be used for additional claims or amendments							
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		
	Indep	Depend	Indep	Depend	Indep	Depend	
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49							
50							
Total Indep	2		1				
Total Depend	8		8				
Total Claims	10		9				